## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail  Or Fax				Commissioner for P.O. Box 1450 Alexandria, Vir	Alexandria, Virginia 22313-1450 (703) 746-4000		
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate and further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless changes have or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.							
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  23535 7590 01/14/2005  MEDLEN & CARROLL, LLP 101 HOWARD STREET				Note: A certificate of Fee(s) Transmittal. The papers. Each addition have its own certificate.	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission.		
SUITE 350 SAN FRANCISCO, CA 94105				States Postal Service addressed to the Ma transmitted to the USI	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
/11/2005 WABDELR3 00000045 09500713				Christo	Christopher To Collins (Depositor's name) (Signature)		
FC:2501 FC:8001				The state of the s	14/5-05 (Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED IN		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/500,713 02/09/2000 James R. Connor 98-2046 2989  TITLE OF INVENTION: METHODS FOR THE DETECTION OF DEMYELINATING DISEASES P5U - C 4/15							
APPLN, TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$0	\$700	04/14/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	]		
CHERNYSHEV, OLGA N 1646				435-007200			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  The Penn State Research Foundation University Park, Pennsylvania							
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government  4a. The following fee(s) are enclosed:  Size Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies / O  Advance Order - # of Copies / O  Permitted on the patent): Individual Corporation or other private group entity Government  4b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number OP-12 GO (enclose an extra copy of this form).							
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.							
Authorized Signature	7 g L.	23~		Date O	4/05/05		
Typed or printed name	Thomas L	U. Broc		Registration			
Alexandra, Virginia 22313-	1430.				the public which is to file (ar minutes to complete, includi omments on the amount of t i Trademark Office, U.S. Dey S. SEND TO: Commissioner displays a valid OMB contro	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, ol number.	